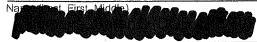
STATE OF VERMONT DRUG RECOGNITION EVALUATION Rolling Log No. Case Number 10-2-37 10A100773 Offense(s) Charged TO BE COMPLETED BY D.R.E. TRAINED PERSONNEL Page DUID Arresting Officer (Name/Agency) 30 STER KAMERING Time / 972 Date/Time/Location of Examination Breath test results .000% 2-19-10 19/5 Admonijion of Rights given by? Instrument # 042139 What have you eaten today? Time? Rights Warved? TRR KAMETULING Are you diabetic or epileptic? Yes No MOTHING Time Now?

11 +1/C 1 + TW When did you last sleep?

8: \sigmapm 4Am -103 How long? Are you sick or injured? Yes No Yes No 4Arn -1030 Arn 65kg FEET GO NUMB/SWELL Are you under the care of a doctor/dentist? DR SK, DD ニドロビー Do you take Yes No Yes No FROM SORE LEFT FOOT DR. COVE HERION ADDICTION Do you have brain damage? Are you taking any medication or drugs? Do you have high blood pressure or heart disease? If yes, describe. Have you ever had a severe Yes ad injury? X No 🖄 но SUCOXONE GMEXZ [NO Yes Yes Breath/Odors Allılude/Behavior Coordination Face RASDY / SIUKKELD
Corrective Keyses - AT Horne POOR LAUGHINED / NONE Blindness None (X) Glasses ☐ Contacts ☐ Hard ☐ Soft None Normal Bloodshot Watery Right Eye Left Eye Pupil size Able to follow stimulus? Eyelids (3) One leg stand Yes Droopy □ No Retracted Normal Unequal (explain) Count # Pulse & Time HGN Vertical nystagmus? Right eye Left eye Yes ☐ Yes Yes Lack of smooth pursuit Convergence ,2030 X No X No Left eye Yes Right eye ☐ Yes Max. deviation X No Angle of onset Resting (0) Rapid (35) Extreme (45) <u> 1 2/15</u> MONE ☐ Immediate (0-30) ☐ Near extreme (40) ☒ None (1) Modified Romberg (2) Walk and turn Cannot keep balance Sways while balancing Started too soon Used arms to balance 1st Nine 2nd Nine Stopped walking Hopping Missed heel-toe L-1-Put foot down Stepped off line SIS STOPPED EXCRUSE Raised arms 1 Type of footwear M WAIL Wall 1 SWAY Actual steps taken SOCKS 12 internal clock Describe turn Cannot do test (explain) USED WALL COULD NOT BNANCE FOR MURE THAN 2 consect STEPPED W/ BOTH FORT Estimated as 30 sec. Nasal area Oral cavity/Tongue Finger/Nose Pupil Size: MM MUOUS CHEWING ON PLASTICE Draw lines to spots touched CLEAR Light Right Eye Left Eye INDICATE FRESH OR OLD PUNCTURE MARKS Room Light 2,5 Attach Photos of Fresh Puncture Marks (optional) 3,5 3.5 KED Direct 3.5 3,5 R HEALD R Α 4 or Comments SCARPING. 0 Ν Rebound dilation Yes M) No (R - L)(L - R)Reaction to light

Normal Slow None Visible Blood pressure Temperature Chemical lest lime ٥F Muscle tone Mear Normal ☐ Flaccid ☐ Rigid ☐ Blood 🏻 Refused FEELS LIKE VOMMING Drug admission? SU BOXONE CMY YRICA SDIRG 3 pm Ki IACP/DRE # Examining Officer I.D. Number 229 S/TAR RAVELIA DRE -- Rave III | Medical | Depressant Stimulant
Hallucinogen Dissociative Anesthetic
Narcotic Analgesic Inhalant VSP WILLSTON



## Violations T 23 VSA 1201(a)(3)

## Drug recognition evaluation report/narrative

- 1: Location: The evaluation was conducted at the Williston Barracks in the DRE processing room.
- 2: Witness: The entire evaluation was witnessed by S/Tpr. Kamerling
- provided a sample of her breath with a result of .000% BrAC at 3: Breath Test: approximately 1912 hours using an Alco IV serial number 042439.
- 4: Notification/Interview of A/O: VSP Williston Dispatch advised S/Tpr. Kamerling was requesting a after he responded to a motor vehicle crash. I spoke with S/Tpr. Kamerling who stated he was notified of a Be On the Look Out (BOL) for a vehicle traveling south on Interstate 89 in the Town of Richmond operating in an erratic manner. S/Tpr. Kamerling advised prior to catching up to the vehicle it crashed. S/Tpr. Kamerling stated while speaking with the operator he observed signs of impairment. After the operator provided a sample of her breath he requested a DRE.
- 5: Initial Observations: I first observed while she was sitting in a holding cell at the Williston Barracks. She was requested to exit the cell and walk to the DUI processing room. She was unable to walk unaided. She stumbled and held onto a door for balance. I noted her eyelids were droopy as she was exhibiting ptosis.
- 6: Medical Problems: stated she suffered from a half numb left foot and a sore right foot. She also stated both of her feet are swollen. She advised she was currently being treated by a doctor but did not have a diagnosis vet.
- 7: Psychophysical Tests: Exhibited impairment though out all portions of the psychophysical tests. On the Modified Romberg Balance, swayed side to side approximately one inch, exhibited eyelid tremors, and took forty four seconds to estimate the passage of thirty seconds. On the Walk and Turn, could not balance during instructions, missed touching heel to toe on steps six and eight, and used the wall for balance twice in the first nine steps. She turned by taking several steps with both feet. On the second set of nine steps, stepped off line on step three and missed touching heel to toe on step six, she had to use the wall for balance, and took twelve steps when instructed to take nine. A used her arms for balance through out the exercise. On the One Leg Stand, could not balance on either foot for longer than two consecutive seconds. While attempting the exercise, stated "I can't even stand for two seconds." The test was stopped. On the Finger to Nose, the pad of her finger on numbers two, four, and five when she was instructed to use the tip of her finger. She failed to touch the tip her nose on step six.

Subscribed and sworn to before me on

this 22 day of FEBRUARY 20/0

20/0

(Notary Public) (Judicial Officer)

(Affiant)

(date)

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Violations T 23 VSA 1201(a)(3)

## Drug recognition evaluation report/narrative

- 8: Clinical Indicators: EYES: exhibited moderate ptosis. I noted her eyes were watery and she exhibited a lack of convergence. pupil size was at the low end of normal in room light and moderately below normal in near total darkness. When checking her pupils reaction to light there was little to no change visible. VITALS: blood pressure was below normal at 108/62. Her body temperature was below normal at 96 degrees.
- 9: **Signs of Ingestion**: Several times though out the evaluation her head would fall forward to where her chin would be resting on her chest. Her body would then fall forward and I would have to tap her on the arm to prevent her from falling. Appeared "On the Nod". The had several healed puncture wounds on both arms and the backs of both hands. She was chewing on a piece of clear plastic that she initially stated was gum. It was too chewed up to determine what it was originally. When she spoke her voice was slurred and raspy. The had a dry mouth and thick mucus.
- 10: **Statements:** stated she was a recovering heroin user and has been clean for six years. She stated she uses Suboxone, 8 mg twice daily, Lyrica, 50 mg, Clonazapam 1mg, and Tramadol 50 mg. She was adamant she had not taken the Clonazapam that she had just purchased this day and when we counted the pills, at her request, three were unaccounted for. I must have taken them then". Several times though out the evaluation stated "I am a terrible mom" due to her two year old son being in the vehicle when it crashed.
- 11: **Opinion of Evaluator:** In my opinion, was under the influence of Narcotic Analgesics and was unable to operate a motor vehicle safely.
- 12: Toxicological Sample: refused to have a sample of her blood drawn
- 13. Miscellaneous: I am a Nationally Certified Drug Recognition Expert since July 2008.

Subscribed and sworn to before me on

this 22 day of FEBRUARY 2010

(Notary Public) (Judicial Officer)

(Affiant)

(date)